



# Ethics Commission Application, 2021

Print your name: \_\_\_\_\_

Print your address: \_\_\_\_\_

Print your email: \_\_\_\_\_

Provide best phone number: \_\_\_\_\_

**Confirm your eligibility:**

\_\_\_\_\_ I am a resident of the Town of Berwyn Heights.

\_\_\_\_\_ I am registered to vote in Maryland/ Town of Berwyn Heights.

\_\_\_\_\_ I do not currently hold an office in the government of the Town of Berwyn Heights.

\_\_\_\_\_ I do not currently have an immediate family member, who is a Town Council member or Town employee.

\_\_\_\_\_ I am not affiliated with a current Town Council election campaign.

\_\_\_\_\_ I do not currently do business with the Town of Berwyn Heights.

**Indicate any prior service on an Ethics Commission:**

\_\_\_\_\_ State and/or County                      When and where \_\_\_\_\_

\_\_\_\_\_ Town of Berwyn Heights                      When \_\_\_\_\_

\_\_\_\_\_ None

**Indicate additional qualifications:**

\_\_\_\_\_ I have previously served in local government in the following capacity: \_\_\_\_\_

\_\_\_\_\_ In addition to English, I am fluent in the following languages: \_\_\_\_\_

**Read the fine print** (see page 2 for description of Ethics Commission mission):

- My **Statement of Interest** is filed with this application (see page 2).
- I am available to review the financial disclosures of Town Council candidates after their papers are filed on the first Tuesday in March in an election year.
- I am available to review the financial disclosures of Town staff after they are filed on April 30 of each year.
- I am available to meet with the Ethics Commission when needed.

**Your Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

Please return completed form to: Kerstin Harper, Town Clerk, Town of Berwyn Heights, 5700 Berwyn Road, Berwyn Heights, MD 20740 by March 31, 2021.

Office Use:                      Date Received: \_\_\_\_\_                      Assigned:                      Yes \_\_\_\_\_                      No \_\_\_\_\_



## Ethics Commission Applicant Statement of Interest

**Applicants to the Ethics Commission should have an interest in and knowledge of ethical standards and local government or willingness and ability to acquire such knowledge. Please explain briefly (3-5 sentences) why you want to serve on the Berwyn Heights Ethics Commission.**


**Your Signature:** \_\_\_\_\_

**Date** \_\_\_\_\_

**Name, Printed:** \_\_\_\_\_

The Berwyn Heights Ethics Commission consists of 3 resident members appointed by the Mayor for a term of 2 years. The Commission is charged with ensuring the ethical conduct of Town elected officials and staff as set forth in [Ordinance 110 – Ethics](#), as amended February 14, 2018. To that end, the Commission shall:

- Annually review the financial disclosures of elected officials, candidates for elected office and certain employees;
- Issue advisory opinions about the applicability of Ethics Ordinance provisions to persons subject to it;
- Issue findings regarding ethics complaints brought before the Commission;
- Annually certify the Town's compliance with State ethics requirements to the State Ethics Commission; and
- Determine whether changes to the Ethics Ordinance are required.

The Ethics Commission is counseled by the Town Attorney.